Packet back to 30ning OMPLETED APPLICATION, TAX 19-0192 Permit #: AND FEE TO: BAYFIELD COUNTY, WISCONSIN ounty Date: and Zoning Depart. Date Stamp (Received) Amount Paid: ENTERED Washburn, WI 54891 MAY 22 ZU19 (715) 373-6138 Refund: Bayfield Co. Zoning Dept. E BEEN ISSUED TO APPLICANT. FILL OUT IN INK (NO PENCIL)

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. ☐ CONDITIONAL USE ☐ SPECIAL USE ☐ B.O.A. ☐ OTHER TYPE OF PERMIT REQUESTED → A LAND USE ☐ SANITARY ☐ PRIVY Mailing Address: City/State/Zip: Telephone: 763-323-0144 10232 Hilltop Ct. Marcus and Regina Magnuson Champlin MWS536 Cell Phone: City/State/Zip: 763-516-7313 DRUMMOND WI 15395 Esox Rd Plumber Phone: Contractor Phone: Scott Haan 715-580-00 Agent Mailing Address (include City/State/Zip): Written Authorization n Signing Application on behalf of Owner(s)) Agent Phone: Attached ☐ Yes ☐ No Recorded Document: (Showing Ownership) Tax ID# PROJECT 20141 Legal Description: (Use Tax Statement) 15288 LOCATION Subdivision: Gov't Lot CSM Vol & Page CSM Doc# Lot(s) No. Block(s) No. Lot(s) NE 1/2, SE 1/4, SW 1/4, NW1/4 Cisto Lot Size Town of: Section 21-4527, Township Sal TYS N, Range RO7 W 133,200 DRummond Distance Structure is from Shoreline: ☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Is Property in Are Wetlands Creek or Landward side of Floodplain? If yes---continue -Present? ☐ Shoreland Yes Yes Distance Structure is from Shoreline : ☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage **X**No **√**No 120 feet If yes---continue ☐ Non-Shoreland Value at Time # of Type of What Type of of Completion Water bedrooms Sewer/Sanitary System # of Stories Foundation Project * include in on Is on the property? donated time & property structure material ☐ City **E** Basement Municipal/City 1-Story X 1 New Construction **X** Well (New) Sanitary Specify Type: Foundation 2 1-Story + Loft ☐ Addition/Alteration Sanitary (Exists) Specify Type: Hobing Tank Slab **-3** 2-Story Conversion Privy (Pit) or Uaulted (min 200 gallon) Relocate (existing bldg) Use Portable (w/service contract) None □ Run a Business on **Compost Toilet** X Year Round Property None Width: Height: Existing Structure: (if permit being applied for is relevant to it) Length: Height: **Proposed Construction:** Width: Square **Dimensions Proposed Use Proposed Structure** Footage X Principal Structure (first structure on property) Х Residence (i.e. cabin, hunting shack, etc.) with Loft X Residential Uselssuance with a Porch X with (2nd) Porch IUN 25 2018 Х with a Deck X with (2nd) Deck) Х) Commercial Useal Staff with Attached Garage Rec'd for Issuance Х) 89 **Bunkhouse** w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities) X) Mobile Home (manufactured date) MAY 3 1 2018 a X) Addition/Alteration (specify) Municipal Use x30 carage Х 840) Accessory Building (specify) Secretarial Staff Accessory Building Addition/Alteration (specify) X Rec'd for Issuance Runk X Special Use: (explain) MAY 29 2018 Χ) Conditional Use: (explain) X Other: (explain) Secretarial Staff (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determ Owners listed on the peod All Owners must sign or letter(s) of authorization must accom Date <u>5/16/19</u> Moneys mpany this application) (If there are Multiple Authorized Agent: _ (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) <u>Attach</u> **Copy of Tax Statement** Address to send permit

Show Location of:

Proposed Construction

(2) Show / Indicate: (3)Show Location of (*): North (N) on Plot Plan

(4)Show: (*) **Driveway** and (*) **Frontage Road** (Name Frontage Road)

Show: (5)

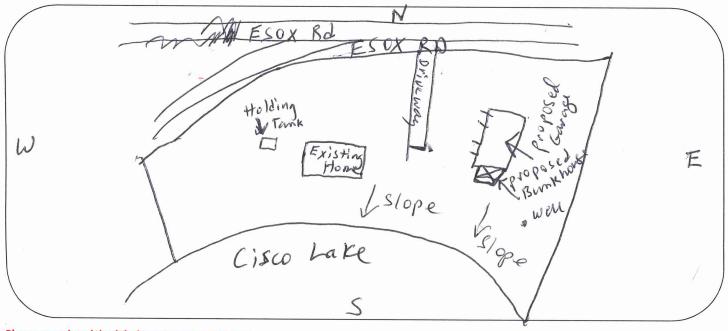
All Existing Structures on your Property

Show any (*): (6)

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(7)Show any (*): (*) Wetlands; or (*) Slopes over 20%



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measuremen	it	Description	Measurement
Setback from the Centerline of Platted Road	155	Feet	Setback from the Lake (ordinary high-water mark)	140 Feet
Setback from the Established Right-of-Way	•	Feet	Setback from the River, Stream, Creek	Feet
			Setback from the Bank or Bluff	55 Feet
Setback from the North Lot Line	145	Feet		
Setback from the South Lot Line	140	Feet	Setback from Wetland	Feet
Setback from the West Lot Line MORY Tha	n7100	Feet	20% Slope Area on the property	? XYes □ No
Setback from the East Lot Line	35	Feet	Elevation of Floodplain	18 Feet
				10
Setback to Septic Tank or Holding Tank	80	Feet	Setback to Well	77 Feet
Setback to Drain Field		Feet		
Setback to Privy (Portable, Composting)	3-	Feet		

er previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	5-525	# of bedrooms: 4	Sanitary Date: 5/29/15		
Permit Denied (Date):	Reason for Denial:					
Permit #: 19-0192	Permit Date: 6-2	5-19				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes (Fused/Contigu	ous Lot(s)) 🗾 No	Mitigation Required Mitigation Attached	☐ Yes ✓ No ☐ Yes	Affidavit Required ☐ Yes ✓ No Affidavit Attached ☐ Yes ✓ No		
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted b ☐ Yes ☑ No	y Variance (B.O.A.)	e #:		
Was Parcel Legally Created Was Proposed Building Site Delineated ✓ Yes □ No		Were Property Lines Represented by Owner Was Property Surveyed Yes No No				
Inspection Record: Flaggod	*	- 1		Zoning District (Rol)		
confirmed Property line w/n	eighbor	1		Lakes Classification (2)		
Date of Inspection: 5/28/19	Inspected by:		" all "	Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attack	ched?	No they need to be atta	ached.)			
Signature of Inspector:	Get ned	d Preparation is outside of Bathroor cessary UDC Permits anitary System) per St		Date of Approval:		
Olpaux				5/29/19		
Hold For Sanitary: Hold For TBA:	Hold For Affi	davit: 🗌	Hold For Fees:			

own, City, Village, State or Federal May Also Be Required

LAND USE - X
SANITARY SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

19-0192 Marcus & Regina Magnuson Issued To: No. 21 Drummond Location: Section Township Range 7 W. Town of Subdivision Cisco Lake Assessors Plat Gov't Lot 13 Block CSM# l ot

For: Residential Accessory Structure: [1.5 - Story; Garage (28' x 30') = 840 sq. ft.;

Bunkhouse (16' x 24') = 384 sq. ft.] Total Overall = 1,224 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): No food preparation. Get necessary UDC permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

June 25, 2019

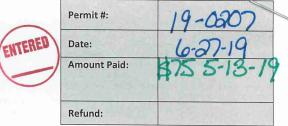
Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891

(715) 373-6138

Authorized Agent:

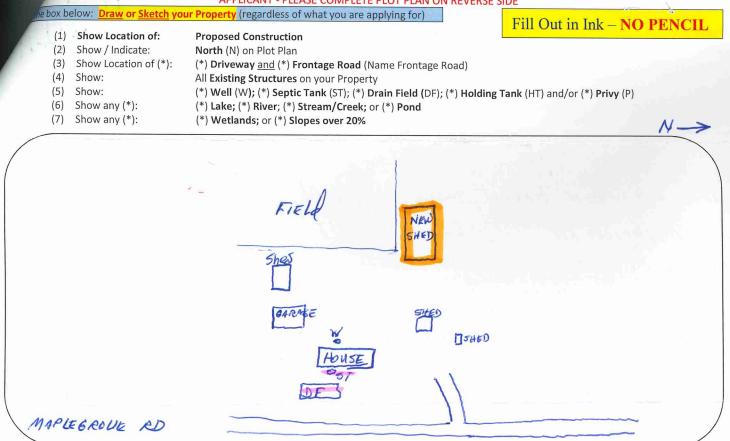
APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN MAY 13 2019 Bayfield Co. Zoning Dept.



Checks are made pay	yable to: E	Bayfield (County Zoning		payrield Co. Zonin	g Dept.		FILL OUT	MANA (NO DEA	ICH)	
				A A A A A A A A A A A A A A A A A A A					IN INK (NO PEN		
TYPE OF PERMIT I	REQUES	IED-	□ LAN		RY PRIVY D	CONDITIONA	AL USE /State/Zip:	SPECIAL L		□ OTH	IER
Charles Address of Property 49265 N Contractor:	# M.	AURI	een t		265 Maplega State/Zip:	1	DRUMA		J.T. 54832	ell Phone:	723 53/
Contractor:	Apres	grov	e Kol.	Con		lumber:	548	32		lumber Pho	77552/
Charles	· Ho	hos	1		5775521	idiliber.				umber Pno	one:
Authorized Agent: (Person Sign	ning Appli	cation on behal	f of Owner(s)) Age	nt Phone:	agent Mailing Ad	ldress (include	City/State/Z	A	/ritten Aut ttached Yes 🗆	No
PROJECT LOCATION	Legal	Descrip		ax Statement)	14675			unu	Recorded Docume		g Ownership) 766 A
N/21/4,	56 1	L/4	Gov't Lot	Lot(s) CSM	677/3/8	1 Doc # Lot(s	s) No. Blo	ck(s) No.	Subdivision:	¥	
Section <u>15</u>	, Tow	nship _	44 N, R	ange 8 W	DRUMM	ond			Lot Size	Acreage 20	
	Creel			n 300 feet of River, Str of Floodplain?	eam (incl. Intermittent) yescontinue	Distance Stru	icture is from		: Is Propert		Are Wetlands Present?
☐ Shoreland →	□ Is P	Property	/Land withir	n 1000 feet of Lake, Po	ond or Flowage yescontinue	Distance Stru	icture is from			s	☐ Yes
Non-Shoreland											
Value at Time				Colonia de la co		# of	THAT				Towns
of Completion * include		Proje	ct	# of Stories	Foundation	bedrooms			t Type of		Type of Water
donated time &		rioje	Ct	# Of Stories	Foundation	in			nitary System e property?		on
material		بالأليا				structure	cture property. pr				
			truction	✓ 1-Story	☐ Basement	□ 1		pal/City			☐ City
\$ 500.00			Alteration	☐ 1-Story + Loft	☐ Foundation	□ 2			Specify Type:		₩well
000		versio	n xisting bldg)	2-Story	NONE	□ 3	Sanitary (Exists) Specify Type: Privy (Pit) or □ Vaulted (min				
			ness on		Use	None				00 gallon)	I
		perty	11033 011		➤ Year Round	None					-
	X C	ANUA	S SHED				□ None	ost rollet			1
Full-time Character	/**										
Proposed Constr			ng applied fo	r is relevant to it)	Length: 60	/	Width:	200	Heigh		-/
					Length. WV		with.	30	Heigh	11: /5	
Proposed Us	se	√	Duineinel	Structure (first stru	Proposed Structu	re			Dimensions		Square Footage
2				Structure (first strue (i.e. cabin, hunting					X)	
			Residence	with Loft	, snack, etc.,				X	1	
🔀 Residential	Use			with a Porch					X)	
				with (2 nd) Porch	4. 4.				(X)	
*				with a Deck					(х)	
				with (2 nd) Deck					(X)	
☐ Commercial	l Use			with Attached Ga					(X)	
**				se w/ (\square sanitary, <u>or</u>					(х)	
7				ome (manufactured d					(х)	
☐ Municipal U	lse			/Alteration (specify)			*		(х)	
_ mamorpar c	,,,,	×		y Building (specify)					30 × 60) 18	000
			Accessor	y Building Addition/	Alteration (specify)		=		(X)	
-			Special II	se: (explain)					Х	1	Ψ
			Condition	se: (explain)				7,	(X	1	
			Other: (e)	19 C 27 S					(X	1	
										1	
I (we) declare that this a	pplication (i	including a	ny accompanying	OBTAIN A PERMIT or STA g information) has been exam	ined by me (us) and to the be	st of my (our) knowle	edge and helief it	is true correct	and complete 1 (we) as	knowledge th	at I (we) am
(are) responsible for the	detail and a y relying on	accuracy of this inforr	fall information I nation I (we) am	(we) am (are) providing and t (are) providing in or with this	hat it will be relied upon by B	Bayfield County in de	termining whether	er to issue a ner	mit I (we) further acce	nt liability wh	ich may be a
Owner(s):(If there are Mult	iple Own	ers listed	on the Deed	All Owners must sign or	letter(s) of authorization	on must agromna	any this applies	ation)	Date MA	19-	2019

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit 49265 MAPLE GROVERD DRUMMOND WI 54832 Copy of Tax Statement



Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Measurem	ent		Description	Measurement
200	Fact		Catharl from the Lake / audio and high control	
				Feet
285	Feet		Setback from the River, Stream, Creek	Feet
			Setback from the Bank or Bluff	Feet
4() 50	Feet			
70	Feet		Setback from Wetland	Feet
	Feet		20% Slope Area on the property	☐ Yes ¥ No
	Feet		Elevation of Floodplain	Feet
-				
200	Feet		Setback to Well	150 Feet
230	Feet			
	Feet			
	300 285 40 50 200	285 Feet 90 Feet Feet Feet Feet 200 Feet 230 Feet	300 Feet 285 Feet 40 50 Feet Feet Feet Feet 200 Feet 230 Feet	300 Feet Setback from the Lake (ordinary high-water mark) 285 Feet Setback from the River, Stream, Creek Setback from the Bank or Bluff 50 Feet Setback from Wetland Feet 20% Slope Area on the property Feet Elevation of Floodplain 200 Feet Setback to Well 230 Feet

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:	24.16	
Permit Denied (Date):	Reason for Denial:	Reason for Denial:				
Permit #: 19-0007	Permit Date: 6-27)-19				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes Yes	ous Lot(s)) // No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No		Yes No	
Granted by Variance (B.O.A.) ☐ Yes ☑ No Case #:		Previously Granted by Yes No		se #:		
Was Parcel Legally Created Was Proposed Building Site Delineated Yes No Inspection Record: Photo & Proplemes in 3	4	Were Property Line	es Represented by Owner Was Property Surveyed	Yes Flagger	○ No □ No	
Inspection Record: Plf. to & Troplanes in ?	-talked to land	ou 162-he will	Measured Flag 5/14		A-11	
Detroffment 600 / 10		10		Lakes Classification (- 1	
Date of Inspection: 6/26/19	Inspected by:	ale		Date of Re-Inspection	ii	
Condition(s): Town, Committee or Board Conditions Attack Signature of Inspector	Condition: No for human h without necess pressurized y	accessory building sinabitation / sleeping sary county and UDC water shall enter the	hall be used purposes permits. No	Date of Approval:	6/27/19	
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🔲	Hold For Fees:	□		

rown, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-0	207			ssued	d To: Ch	arles	& Maureen	Hebe	ert					
S 330' of Location:		1/4	of	SE	1/4	Section	15	Township	44	N.	Range	8	W.	Town of	Drummond
Gov't Lot			L	.ot		Blo	ck	Sul	odivisio	n				CSM#	

For: Residential Accessory Structure: [1- Story; Tractor Shed (30' x 60') = 1,800 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting

Condition(s): No accessory building shall be used for human habitation / sleeping purposes without necessary County and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

June 27, 2019

Date

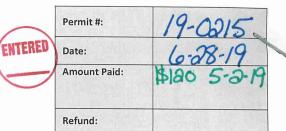
SUBMIT: COMPLETED APPLICATION, TAX STATEMEN AND FEE TO: **Bayfield County**

Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received) MAY 022019

Bayfield Co. Zoning Dept



INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department

DO NOT START CONS	TRUCTION UNTIL	ALL PERMITS I	HAVE BEEN ISSUED	TO APPLICAN	I <mark>T</mark> .		FILL OU	T IN INK (<mark>NO F</mark>	PENCIL)		
TYPE OF PERMIT F	REQUESTED -	□ LAN	D USE SA	NITARY [□ PRIVY [CONDITION	AL USE SPECIAL	USE B.O.	.A. 🗆 O	THER	
Owner's Name:	-			Mailing Ad	Idress: UI	VIT () Cit	y/State/Zip:		Telephone		
Homas	00	MNSO		910 TA	AINTIGH S	7	ENOMINIO, L	5475	7-15	308-03	
I HOMAS Address of Property 48464	LARS	TON X	LUAD	City/State/	/zip: Pymm i	NA C	II 59		Cell Phone	:: 5-308-a	
Contractor: SE				Contractor	Phone:	Plumber:	1/0		Plumber P	hone:	
Authorized Agent: (ication on beha	If of Owner(s))	Agent Phon		Agent Mailing A	ddress (include City/State	/Zip):	Attached	uthorization	
PROJECT LOCATION	Legal Descrip	otion: (Use T	ax Statement)	Tax ID#	339	82	7, 7, 7,	Record Con	☐ Yes ☐ ument: (Show	No ving Ownership)	
1/4,	1/4	Gov't Lot	• 1			M Doc # Lot	(s) No. Block(s) No.	Subdivision:		7	
Section _22	, Township _	4/4 N, R	lange 07 V		IRUM			Lot Size	Acreage	3.1	
										J.1	
	Creek or Lar		n 300 feet of Riv		incl. Intermittent)		ucture is from Shorelin	IS Pro	perty in ain Zone?	Are Wetlands	
☐ Shoreland →	X Is Propert	y/Land withi	n 1000 feet of La		Flowage		ucture is from Shorelin	e:	Yes No	Present? ☐ Yes 🖺 No	
☐ Non-Shoreland				· .			÷			, , ,	
V-1											
Value at Time of Completion	Proje	act	# of Storie	ac E	oundation	# of bedrooms		at Type of		Type of Water	
donated time &			W OI Storie		oundation	in		Sanitary Syster the property?	"	on	
material -	☐ New Cons	truction	1-Story		Basement	1	Municipal/City			property	
	X Addition/		☐ 1-Story +		Foundation		(New) Sanitary	Specify Type: _		☐ City ☐ Well	
40,000. Ju	☐ Conversio		☐ 2-Story	X	ELEVATED	3	Sanitary (Exists) Specify Type:	Grav. 7.		
	☐ Relocate (0 0/			Use	None			Vaulted (min 200 gallon)		
	Property	111033 011			Year Round		Portable (w/serv			-	
				×	3 SEASO	Room	None				
Existing Structure	: (if permit bei	ng applied fo	or is relevant to it	lon	a made :			-			
		0 1	i is relevant to it	Lei	ngth:		Width:	He	eight:		
Proposed Constru	uction:		in is relevant to it		ngth:	16'	Width:		eight: eight:	12'	
			in is relevant to re	Len	ngth:	16 ·	1 1	He	eight:	/2 Square	
Proposed Constru	e ✓			Len Prop	ngth: posed Structi		1 1	Dimensio	eight:	Square Footage	
		Principal	Structure (firs	Prop t structure	oosed Struction		1 1	He	eight:		
Proposed Us	e 🗸	Principal	Structure (firs e (i.e. cabin, hu with Loft	Prop t structure inting shack	oosed Struction		1 1	Dimensio (X	eight:		
	e 🗸	Principal	Structure (firs e (i.e. cabin, hu with Loft with a Porch	Propert structure anting shack	oosed Struction		1 1	Dimensio (X (X (X	eight:		
Proposed Us	e 🗸	Principal	Structure (firs e (i.e. cabin, hu with Loft	Prop t structure unting shack	oosed Struction		1 1	Dimensio (X (X (X (X	eight:		
Proposed Us Residential	e ✓	Principal	Structure (firs e (i.e. cabin, hu with Loft with a Porch with (2 nd) Po	Prop t structure inting shack	oosed Struction		1 1	Dimensio (X (X (X	eight:		
Proposed Us	e ✓	Principal	Structure (firs e (i.e. cabin, hu with Loft with a Porch with (2 nd) Po with a Deck	Prop t structure inting shack	oosed Struction		1 1	Dimensio (X (X (X (X (X (X (X	eight:		
Proposed Us Residential	Use Use	Principal Residence	Structure (firs' e (i.e. cabin, hu with Loft with a Porch with (2 nd) Po with a Deck with (2 nd) Do with Attach se w/ (sanitar	Prop t structure inting shack n orch eck ed Garage y, or Slee	oosed Structi on property k, etc.))	1 1	Dimensio (eight:		
Proposed Us Residential	e ✓ Use Use	Principal Residence Bunkhou Mobile H	Structure (firster) e (i.e. cabin, hu with Loft with a Porch with (2 nd) Po with a Deck with (2 nd) Do with Attach se w/ (□ sanitar ome (manufacture)	Prop t structure inting shack orch eck ed Garage y, or slee ured date)	oosed Struction on property k, etc.)	s, or a cooking	Width: /6	Dimensio (ns)))))))))))))))))))	Footage	
Proposed Us Residential	Use Use	Principal Residence Bunkhou Mobile H Addition	Structure (firsterm (firsterm)) e (i.e. cabin, huwith Loft with a Porchwith (2nd) Powith a Deckwith (2nd) Dowith Attach (2nd) Dowith Attach (2nd) (2n	Prop t structure inting shack torch eck ed Garage y, or slee ured date) pecify)	oosed Structi on property k, etc.)	s, or a cooking	Width: /6	He Dimensio	eight:		
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Bayfield County he box below: Draw or Sketch your Property (regardless of what you are applying for) APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE Fill Out in Ink - NO PENCIL (1)Show Location of: **Proposed Construction** Show / Indicate: (2)North (N) on Plot Plan Show Location of (*): (3)(*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (5)Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) Show any (*): (6)(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (7)Show any (*): (*) Wetlands; or (*) Slopes over 20% SOU ATTACHOS MADE

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement		Description	Measuremer	nt
Setback from the Centerline of Platted Road	= 650 Feet	1	Setback from the Lake (ordinary high-water mark)	120	Feet
Setback from the Established Right-of-Way	Feet		Setback from the River, Stream, Creek	NIA	Feet
			Setback from the Bank or Bluff	1	Feet
Setback from the North Lot Line	126Feet				_
Setback from the South Lot Line	2 4Feet		Setback from Wetland	WIT	Feet
Setback from the West Lot Line	5 Sefeet		20% Slope Area on the property	□ Yes 🗶 N	lo
Setback from the East Lot Line (LMCV)	120Feet		Elevation of Floodplain	NIA	Feet
Setback to Septic Tank or Holding Tank	50 Feet		Setback to Well	100	Feet
Setback to Drain Field	95 Feet			100	
Setback to Privy (Portable, Composting)	w/A Feet	11.			

her previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be narked by a licensed surveyor at the owner's expense.

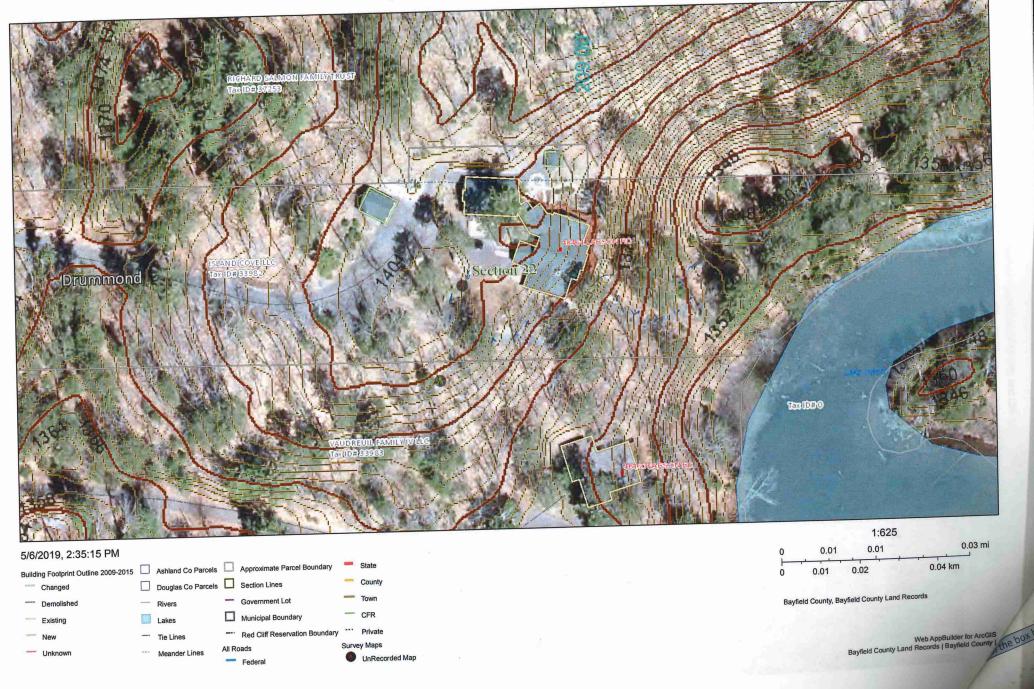
(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	5-1425	# of bedrooms: 3	Sanitary Date: 8/8/0	6
Permit Denied (Date):	Reason for Denial:				
Permit#: 19-0815	Permit Date: 6-2	8-19			
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming ☐ Yes (Deed of Record ☐ Yes (Fused/Contigue	ous Lot(s)) / No	Mitigation Required Mitigation Attached	☐ Yes ☑ No ☐ Yes ☑ No	Affidavit Required	□ No ·
Granted by Variance (B.O.A.) ☐ Yes ✓ No Case #:		Previously Granted b	y Variance (B.O.A.) Case	e #:	
Was Parcel Legally Created Was Proposed Building Site Delineated ✓ Yes □ No		Were Property Lines Represented by Owner Was Property Surveyed Yes Yes			
Inspection Record:		1		Zoning District (R Lakes Classification (-1,
Date of Inspection: 5/7/19	Inspected by:			Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attac	had? Ves No - (If	No they need to be atta	iched.)		
Signature of Inspector:	practices shall erosion or se	nstruction site best m be implemented to p edimentation onto r etlands. Necessary l d.	revent any	Date of Approval: 6/	25/19
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗆	поштог геез: 🗌 🔃	_	

Bayfield County Web AppBuilder



lage, State or Federal Also Be Required

ONDITIONAL -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

W.	Town of	Drummond	
	CSM#	1447	
			CSM# 1447

for: Residential Addition / Alteration: [1- Story; <u>3 Season Room</u> ()

(Disclaimer): Any future expansions or development would require additional permitting

Condition(s): Construction site best management practices shall be implemented to prevent any erosion or sedimentation onto neighboring properties or wetlands. Necessary UDC permit shall be obtained.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

> Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

June 28, 2019

Date